

# SALEM VA



## COMMISSIONER OF THE REVENUE

Kristie D. Chittum, Commissioner of the Revenue

### APPLICATION FOR PERSONAL PROPERTY TAX RELIEF FOR VETERANS

#### QUALIFICATIONS:

- ☐ 100% service-connected AND permanently and totally disabled.
- ☐ The vehicle is owned by the veteran or owned jointly with a spouse.
- ☐ The vehicle is used by or for the veteran.

#### REQUIRED DOCUMENTATION:

- ☐ Certification of disability from the United States Department of Veterans Affairs being (a) 100% service-connected, AND (b) permanent AND (c) total.

<b>APPLICANT INFORMATION</b>			
Name of Veteran ( <i>Last, First, Middle Initial</i> ):	Date of Birth	Social Security No.:	Telephone No.(s):
Name of Spouse <i>if applicable</i> (Last, First Middle Initial):			
Address of Primary Residence			
Mailing Address ( <i>if different from Primary Residence Address</i> )			
<b>Vehicle For Which You Are Seeking Tax Exemption</b>			
Please Check One: <input type="checkbox"/> <b>New/Original Application</b> OR <input type="checkbox"/> <b>Re-Application (For Renewal or Change of Vehicle)</b>			
Year	Make	Model	Identification Number
Is the above vehicle owned and used primarily by or for the veteran? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>			
Certification from the U.S. Department of Veterans Affairs of 100% service-connected, permanent, and total disability is: <div style="text-align: center; margin-top: 5px;"><input type="checkbox"/> Attached <input type="checkbox"/> Already on File with the Commissioner of the Revenue</div>			
<b>CERTIFICATION</b>			
<b>VETERAN:</b> I declare, under penalty of perjury, that the above-listed vehicle is owned and used primarily by or for myself, that I have provided to this office the designated U.S. Department of Veteran's Affairs letter issued to me attesting to my 100% service-connected, permanent, and total disability, and that I understand I must reapply every year for the tax relief and in the event of a vehicle change. I further declare, under penalty of perjury, that I am not claiming another vehicle for exemption in another locality in Virginia and that the foregoing information and accompanying documentation are true, correct, and complete to the best of my knowledge and belief.  <div style="display: flex; justify-content: space-between; margin-top: 20px;"><div style="width: 60%; border-top: 1px solid black; text-align: center;">Signature of Veteran</div><div style="width: 35%; border-top: 1px solid black; text-align: center;">Date</div></div>			

Signature of Preparer (if not applicant)

Relationship

Telephone No.

Date

P.O. Box 869

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114 N. Broad St., Salem, VA 24153

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(540) 375-3019

[www.salemva.gov](http://www.salemva.gov)